

Work Order ID 95203

January-02-13 3:16:30 PM

95203

Page 1

Item ID: D4017-9

Revision ID:

Item Name: Rib

Start Date: 1/14/13 Start Qty: 2.00

Required Date: 1/14/13 Req'd Qty: 2.00

Reference:

Approvals:

Process Plan:

*PL*Date: *13-01-7*

Tooling:

Date:

Run Start

NR1Stop ***NS2*****2* 10
*2**

Cust Item ID:

Customer:

QC:

Date:

SPC (Y/N):

Date:

Run Start

NR2Stop ***NS1***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
100	D	0.00							
100 Large Fab	Memo	0.00							
Large Fab	1- Cut tube as per dwg D4017 2- Deburr and remove identify marks								
110	QC6- Inspect dimensions to drawing	0.00							
110 QC	Memo	0.00							
Quality Control									
120	Identify as per dwg & Stock Location: <i>WA.001</i>	0.00							
120 Packaging	Memo	0.00							
Packaging									

*10 Q Dk 13-03-04**(DAS 09)**(10) 13-03-05**DAS 09**(10) 13-03-05*

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other			
Part No. _____ NCR No. _____										
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other						

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other						
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled						

Picklist Print

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Page 1

Work Order ID: 95203

Parent Item: D4017-9

Parent Item Name: Rib

Start Date: 1/14/13

Required Date: 1/14/13

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP RevA: new issue DD 09.11.26 verified by:EC IPP Rev:B as per dwg RevA DD
10.03.06 verified by:EC IPP Rev:C as per dwg RevB DD 10.04.16 verified by:EC IPP
Rev:D as per dwg revC DD 10.08.18 verified by:EC IPP Rev:E 11.01.17 chg qc5 to 6 DD
verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304TS0.500W.049 Square Tubing		Purchased	No			100	f	1,077.9999	2.28166	4.8034947			DL

Location	Loc Qty	Loc Code
MAT018	4.50752	
122413	4.50752	
WA006	1073.492415	
118460	0.00001534	
121808	0.07	
122938	488.4224	
123565	585	

24.01

(10X) 13-03-04

DL

24.01

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

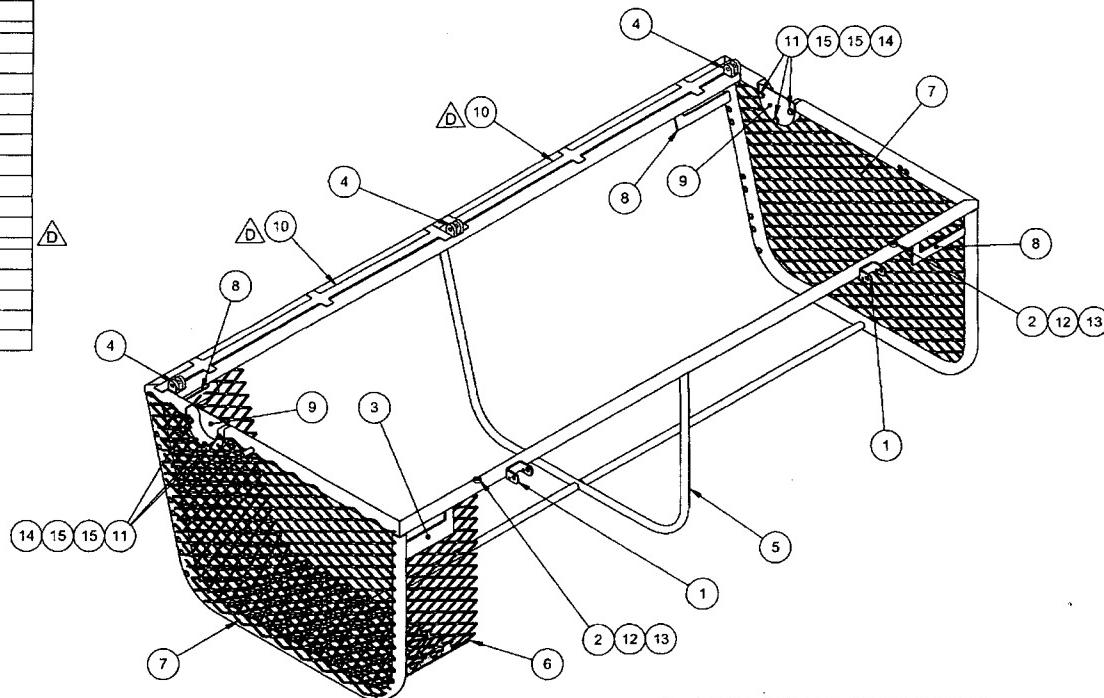
DQA: Date:

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Part No. _____ NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear			General								
Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>							
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>							
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>							
Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>							
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>								
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>								
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>								
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>									
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>									
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>									
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>									

95203
PL13-01-7

ITEM	QTY	P/N	DESCRIPTION
	X	D4017-041	SHORT BASKET BASE ASSY (350)
1	2	D2581	MOUNTING BRACKET
2	2	D2931	BUMPER
3	1	D3913-15	WIDE HANDLE PLATE
4	3	D4016-1	HINGE HALF, BASE
5	1	D4017-101	TUBULAR ASSY (350 SHORT BASKET)
6	1	D4020-3	MESH (350 BASKET SHORT BASE)
7	2	D4020-11	END MESH, BASKET
8	3	D4021-1	HANDLE PLATE
9	2	D4021-5	BLANKING PLATE
10	2	D4672-3	BLANKING PLATE
11	6	AN3-10A	BOLT
12	2	AN960JD8	WASHER
13	2	MS20600AD4W3	RIVET
14	6	MS21042L3	NUT
15	12	NAS1149F0332P	WASHER



D4017-041 SHORT BASKET BASE ASSY (350)
(MESH SHOWN LOCALLY FOR CLARITY)

- NOTES:
- 1) MATERIAL: N/A
 - 2) FINISH: POWDER COAT WHITE (4.3.5.2) PER DART QSI 005 4.3
 - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 - 5) BREAK SHARP EDGES: N/A
 - 6) IDENTIFICATION: NONE
 - 7) WEIGHT: 28.8 lbs APPROX
 - 8) INSTALL AFTER FINISH
 - 9) MASK HOLES PRIOR TO POWDER COAT
 - 10) WELD PER DART QSI 004

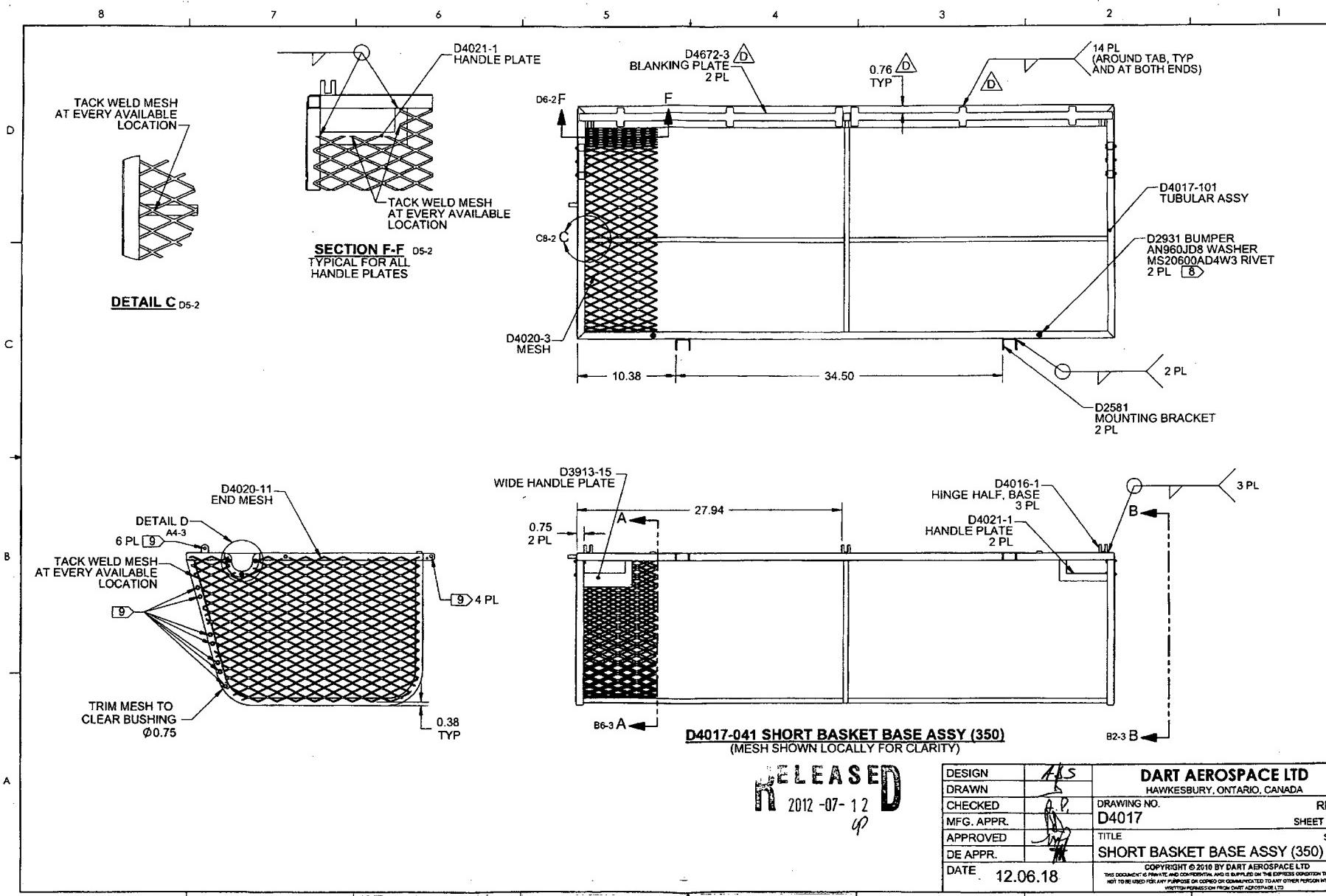
RELEASED
2012-07-12

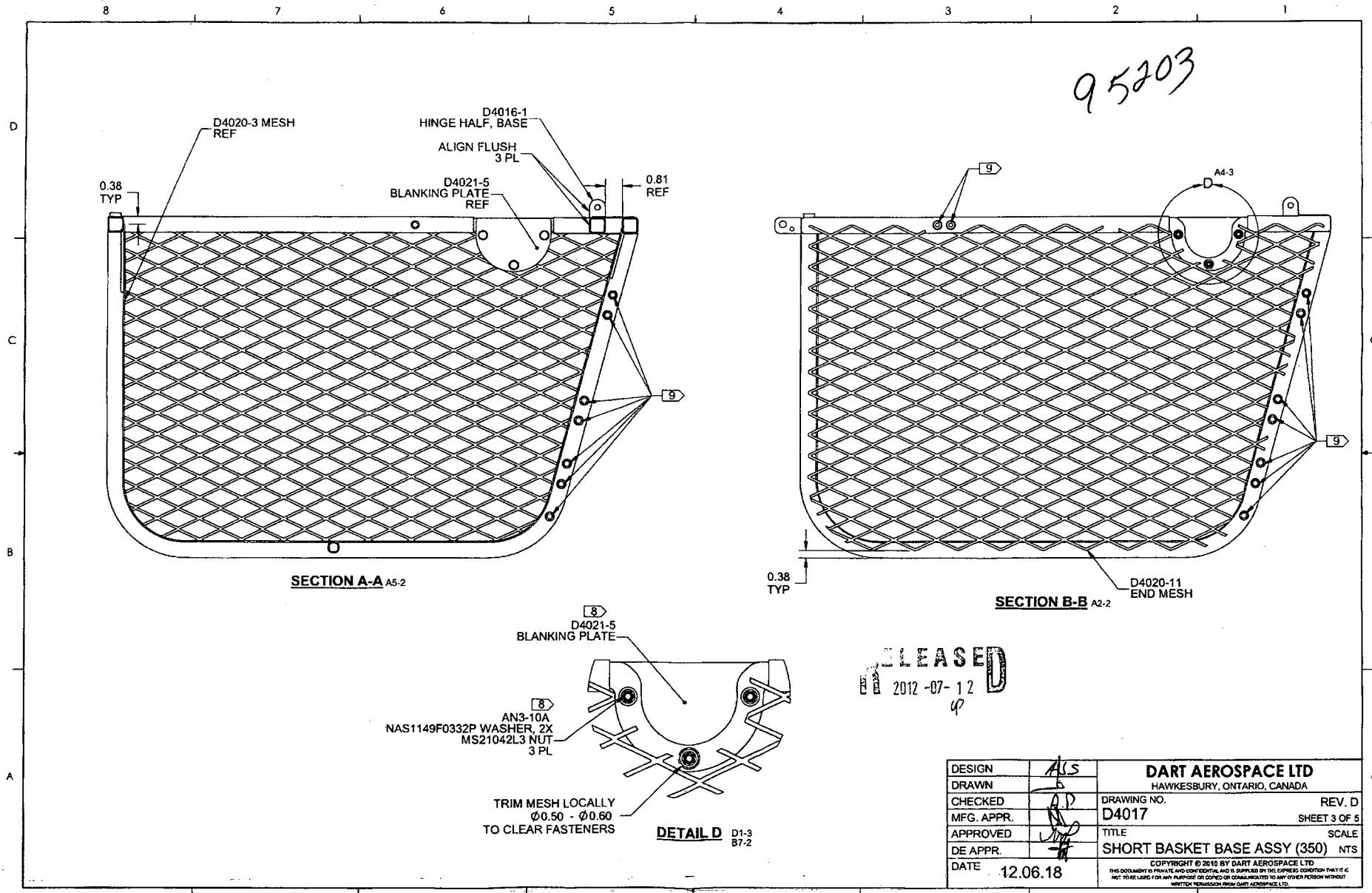
P BCN 12-610

D	ADD D4672-3 (2N C5-1, D4-1, D6-1, D3-2, AND D4-2). REASON: PAR12-197.	MB	12.06.18
C	ITEM #4 NOW INSTALLED OUTBOARD (C4-1, C5-1, B5-2 AND D6-2). REASON: ELIMINATE INTERFERENCE PREVENTING INSTALLATION OF RECEIVER ASSEMBLIES.	MB	10.07.23
B	QTY 1 D4021-1 REPLACED WITH QTY 1 D3913-15; AN3-10A BOLT WAS AN3C10A; NAS1149F0332P WASHER WAS NAS1149C0332R; SECTION F-F UPDATED (D8-2); ITEMS RENUMBERED, DETAIL D UPDATED (A4-3)	JPH	10.03.25
A	NEW ISSUE	AJS	10.03.04
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		REV. D	
MFG. APPR.		D4017	SHEET 1 OF 5
APPROVED		TITLE	
DE APPR.		SCALE	
DATE	12.06.18	SHORT BASKET BASE ASSY (350) NTS	

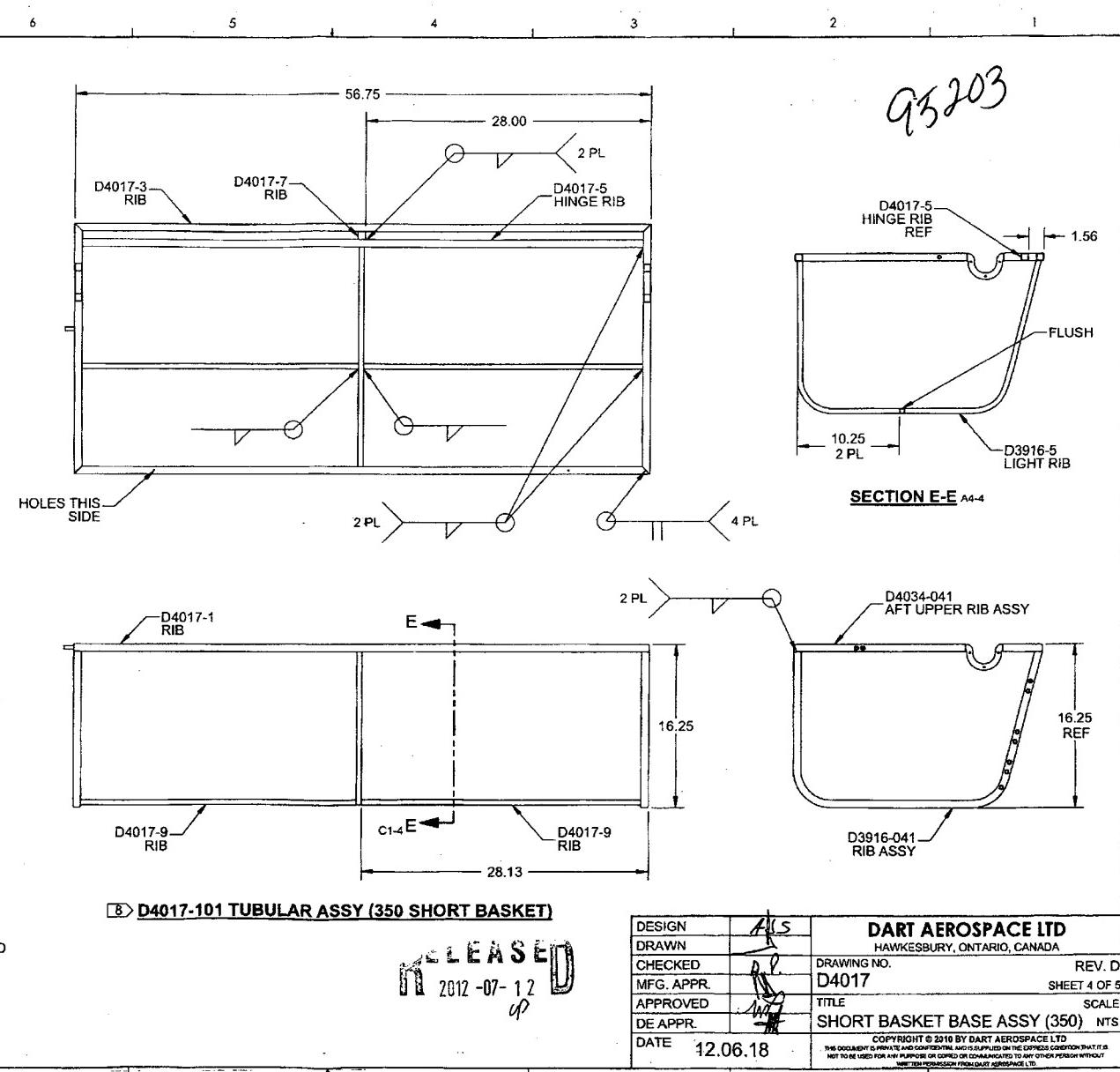
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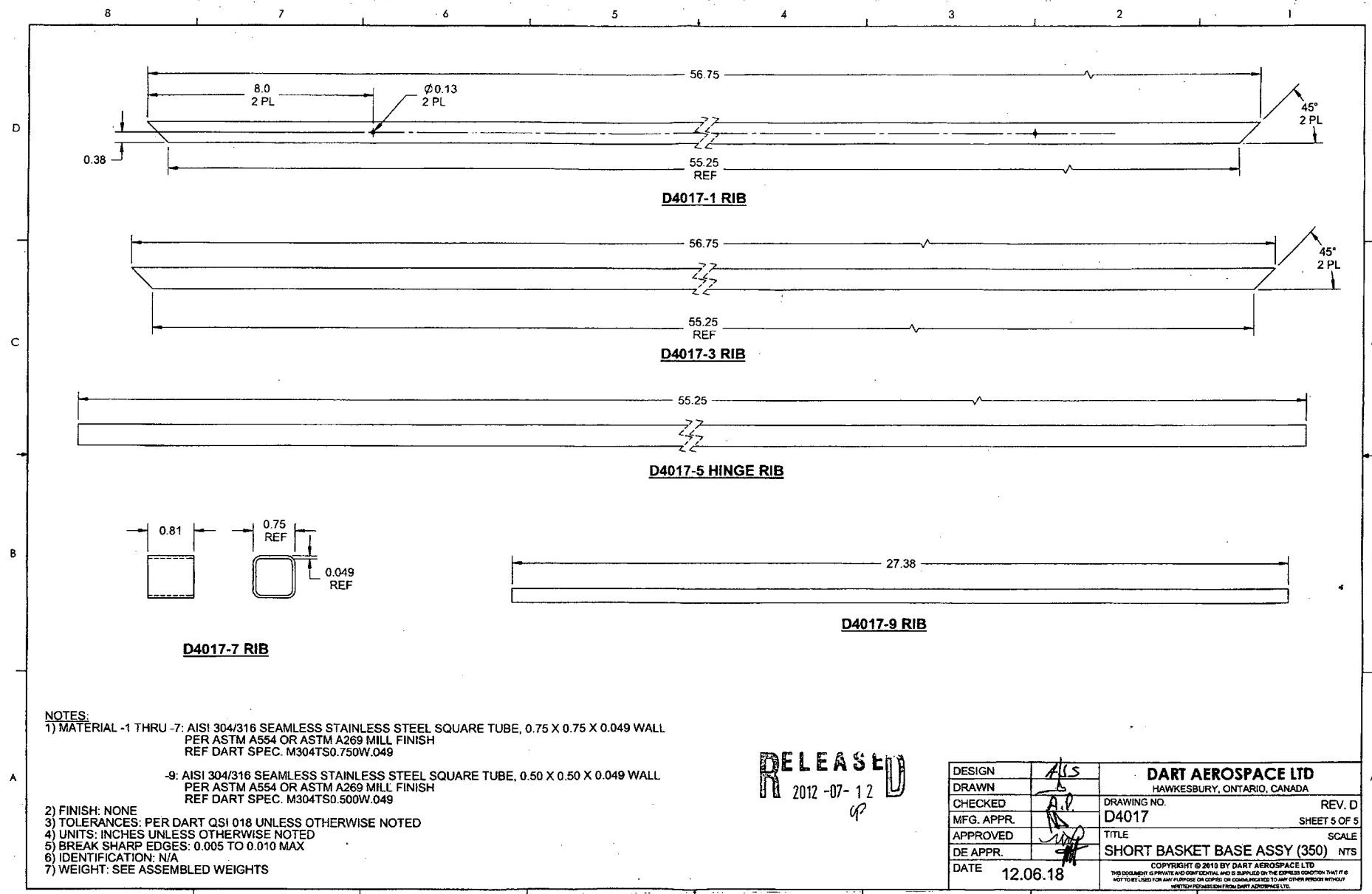




ITEM	QTY	P/N	DESCRIPTION
	101	X D4017-101	TUBULAR ASSY (350 SHORT BASKET)
1	1	D4017-1	RIB
2	1	D4017-3	RIB
3	1	D4017-5	HINGE RIB
4	1	D4017-7	RIB
5	2	D4017-9	RIB
6	2	D3916-041	RIB ASSY
7	1	D3916-5	LIGHT RIB
8	1	D4034-041	AFT UPPER RIB ASSY
9	1	D4034-043	FWD UPPER RIB ASSY



95203

RELEASED
2012-07-12
RP

DESIGN	ALS	DART AEROSPACE LTD
DRAWN		HAWKESBURY, ONTARIO, CANADA
CHECKED	A.P.	REV. D
MFG. APPR.		DRAWING NO.
APPROVED		SHEET 5 OF 5
DE APPR.		TITLE
DATE	12.06.18	SCALE
SHORT BASKET BASE ASSY (350) NTS		

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